

Summer 1999

OSHDP MONITOR

OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT



**Meet Grantland Johnson:
Secretary of California Health
and Human Services Agency**

Summer 1999

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Governor
State of California

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Health and Human Services Agency

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The purpose of the OSHPD Monitor is to promote communication with our clients, health care providers, health professional training programs, associations, legislative representatives, and the public.

The mission of the Office of Statewide Health Planning and Development is to plan for and support development of health care delivery systems that meet the current and future needs of the people of California.

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OSHDP Welcomes Grantland Johnson

Secretary of the Health and Human Services Agency

"Mr. Johnson is involved in issues affecting millions of Californians of all ages."

Grantland Johnson was appointed Secretary of the California Health and Human Services Agency by Governor Gray Davis in January of 1999. As a member of the Governor's Cabinet, he serves as Governor Davis' chief advisor on health, social services and employment policy.

Mr. Johnson manages an agency that has more than 42,000 employees and a total budget of over \$49 billion. The Agency oversees 12 state departments, including OSHDP, and one board. Together they are responsible for providing health, social services, mental health, rehabilitation, developmental services, employment and other critical services to California residents.

As Secretary, Mr. Johnson is involved in issues affecting millions of Californians of all ages such as: affordable health coverage, teenage pregnancy prevention, senior programs, and employment benefits.

Mr. Johnson came to State service with extensive experience at both local and federal levels of government. From 1983-1986, he was a member of the Sacramento City Council. In 1987 he was elected to the Sacramento County Board of Supervisors and served on that board for seven years. In 1993, he was appointed by federal Health and Human Services Secretary Donna Shalala as Regional Director for Region IX of the Department of Health and Human Services. (Region IX includes Arizona, California, Hawaii, Nevada, Guam, Micronesia and American Samoa.) This was the position he held when appointed Secretary.

Mr. Johnson was born in Sacramento. He received his bachelor's degree in government from the California State University at Sacramento in 1974. He is a graduate of the Senior Executive Training Program for State and Local Government at Harvard's John F. Kennedy School of Government.

Mr. Johnson's many affiliations have included chairmanship of the California State Association of Counties Health and Human Services Policy Committee; member, California State Association of Counties Youth Policy Task Force; board member, Center for Integrated Services for Families and Neighborhoods; board member, Congress for New Urbanism; board member, Local Government Commission; Fellow, National Academy of Public Administration; and board member, Alliance for Redesigning Government, founded by David Osborne and Ted Gaebler, co-authors of Reinventing Government.

Mr. Johnson and his wife Charlot Bolton have a daughter, Patrice.

Cal-Mortgage Program

Supporting Development of Community Services



The H.E.L.P. Group

The Cal-Mortgage program within OSHPD provides loan insurance for the construction or expansion of nonprofit health care facilities throughout the State. The program began in 1969 and since that time has provided construction loan insurance for over 400 health care facilities. Following are two recent projects for which Cal-Mortgage has insured loans.

The H.E.L.P. Group is a consortium of seven affiliated nonprofit agencies offering therapy and education for children and adolescents with special needs in the Southern California area. OSHPD's Cal-Mortgage Loan Insurance Program insured a loan in the amount of \$17,275,000 to refinance this Corporation's long-term debt, and to acquire and renovate their Coldwater Canyon Property.

The H.E.L.P. Group is comprised of the:

- Los Angeles Center for Therapy and Education,
- New School for Child Development,
- Project Six,
- Southern California Living Centers,
- New Opportunities for Living,
- Pacific Living Alternatives, and
- Summit View School.

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Through these agencies, H.E.L.P. operates eight group homes for children, two adult residential homes, and five intermediate care facilities/developmentally disabled-habilitative (ICFDDH) homes for children and adults. The Center for Therapy and Education provides community mental health programs and community programs for mentally and/or developmentally disabled residents of Los Angeles County, and operate a special education day school program for children and adolescents with special needs.

In Los Angeles County, there are approximately 160,000 students enrolled in special education programs such as those offered by The H.E.L.P. Group. This number is growing by approximately 4,000 students per year, suggesting a great deal of unmet need for these services. These students have specific disabilities, including autism, serious emotional disturbance and specific learning disabilities.

The National Institute of Mental Health recently estimated that 6% of the population is severely mentally ill and in need of mental health services. Using this as a measure, approximately 120,000 persons in San Fernando Valley, 240,000 in the City of Los Angeles, and 600,000 in Los Angeles County would fall into this category. Also reflective of the substantial need for mental health services is a 1997 Department of Mental Health (DMH) study, which estimated that 600,000 Californians would qualify for DMH mental health services. Fortunately, with facilities such as those operated by The H.E.L.P. Group, an estimated one-third of these Californians are currently receiving the mental health services then need.

The group homes and adult residential facilities are licensed by the State Department of Social Services, the intermediate care facilities/developmentally disabled-habilitative centers are licensed by the State Department of Health Services, and the Center for Therapy and Education is certified to provide language and speech pathology and counseling by the State Department of Education.

This project's insured loan is for a period of 24 years, and the Cal-Mortgage staff will continue to monitor its progress throughout its term.

El Proyecto del Barrio operates community health care clinics, providing primary medical care, job training and placement, and youth services to economically disadvantaged youth and young adults in the San Fernando Valley area of Southern California. In April 1997, OSHPD's Cal-Mortgage Loan Insurance Program insured a \$4,575,000 loan to finance the construction of their primary care clinic in Canoga Park, California.

" El Proyecto del Barrio's strategic plan remains to modernize its facilities and expand services in a historically underserved area of Southern California."



El Proyecto del Barrio

El Proyecto del Barrio began serving the community in 1971 by providing drug treatment and rehabilitation services in its first primary care clinic in Pacoima, California. In August 1991, its second clinic in Arleta was financed by a Cal-Mortgage insured loan. Since 1971, El Proyecto del Barrio has expanded its services to include:

- Primary health care,
- HIV outpatient medical services,
- HIV/AIDS outreach and prevention,
- Perinatal services for drug misusing mothers and their children,
- Drug rehabilitation and prevention,
- Employment training and job placement, and
- Bilingual and bicultural health care services.

Currently under construction in Canoga Park is their newest Cal-Mortgage insured facility — a three story, 28 thousand square foot community health care clinic. The project funds were used to purchase property, cover construction costs, purchase fixed and moveable equipment, and pay for bond issuance costs.

The first floor of the Canoga Park clinic will house primary clinic services, including 12 exam rooms, medical staff offices, medical records, laboratory, pharmacy, and X-ray suites. The second floor of the clinic will be for the perinatal program, daycare, and administrative office space. The third floor will house clinic administration, case management, health education and HIV/AIDS programs.

El Proyecto del Barrio's strategic plan remains to modernize its facilities and expand services in a historically underserved area of Southern California. The Cal-Mortgage staff will continue monitoring this project for the life of the loan.

Health Careers Training Program

Preparing low-income and unemployed Californians for health care jobs

California has an almost unquenchable need for qualified entry- and mid-level health care workers. The Office of Statewide Health Planning and Development's (OSHPD's) Health Careers Training Program (HCTP) is leading the way in helping to recruit and train low income and unemployed individuals for entry-level allied health care jobs. These jobs include Community Health Worker, Surgical Technician, Emergency Medical Technician, Medical Assistant, and Pharmacy Clerk.

The HCTP was established in 1992 as a Governor's Initiative. It began as a two year pilot project to help identify and develop training and funding resources to recruit and train low income and unemployed individuals for needed entry-level allied health care jobs. Since then, HCTP has evolved from helping to directly place individuals into jobs, to facilitating partnerships and collaborations among health care employers, health training providers, and funding sources to meet the State's need for appropriately trained health care workers.

With recent welfare reform and time limits placed upon the receipt of aid, an opportunity for training welfare recipients for job openings has resulted. Millions of dollars have been allocated to help these individuals in their transition from welfare to work. The critical need for health care workers is evidenced by the thousands of job vacancies found statewide. A significant number of these health care positions could be filled with Welfare-to-Work participants. The HCTP program is the only statewide coordinated effort to ensure that a portion of these funds are used to help prepare and place Welfare-to-Work participants into critically needed health care jobs.

An important accomplishment of HCTP is its success in developing and expanding collaborative partnerships. Health care employers need help in identifying funding resources and/or developing new or expanded training programs to meet their staffing needs. This often requires collaborations with public and private sector health care providers, training providers, and available funding entities. Through its health workforce development activities, HCTP works closely with its network of local health care facilities, Workforce Industry Boards (formerly Private Industry Councils), and educational institutions in developing needed health care training programs. During the 1997-98 fiscal year in Los Angeles County alone, HCTP was instrumental in placing over 250 individuals into entry- and mid-level health care jobs through collaborative partnerships it helped to create.

" An important accomplishment of HCTP is its success in developing and expanding collaborative partnerships."

Diana Fuentes-Michel: Assistant Secretary for Higher Education

Governor Davis names former HPCOP Student to high-level post

The Office of Statewide Health Planning and Development congratulates OSHPD alumna Diana Fuentes-Michel for her recent appointment as the Assistant Secretary for Higher Education in the Davis Administration.

Fuentes-Michel worked in OSHPD's Primary Care Resources and Community Development Division as a graduate student assistant in the Health Professions Career Opportunity Program (HPCOP) from 1985-1986. She served as editor of the Division's "Health Pathways" newsletter. She was responsible for contributing to publications that informed students about health career opportunities.

Prior to her new appointment as Assistant Secretary, Fuentes-Michel was the coordinator for governmental relations for the California Postsecondary Education Commission (CPEC), the State's planning and coordinating body for postsecondary education. In that capacity, Fuentes-Michel was responsible for the development, implementation and representation of the Commission's legislative and budget agenda before the Governor and the Legislature. Earlier positions included work in the area of student financial aid for the California Community Colleges, Chancellor's Office; for the Department of Finance as a program budget analyst; and for the California Legislature as a legislative assistant to Assembly Member Peter Chacon.

In addition to her work in state government and higher education, Ms. Fuentes-Michel has served as executive director of the Chicano/Latino Youth Leadership Project and as a legislative advocate for Raza Administrators and Counselors in Higher Education.

An honors graduate of Loyola Marymount University, Fuentes-Michel received her Master of Arts degree in Government from California State University, Sacramento. In 1979 she was a California State Senate Fellow.

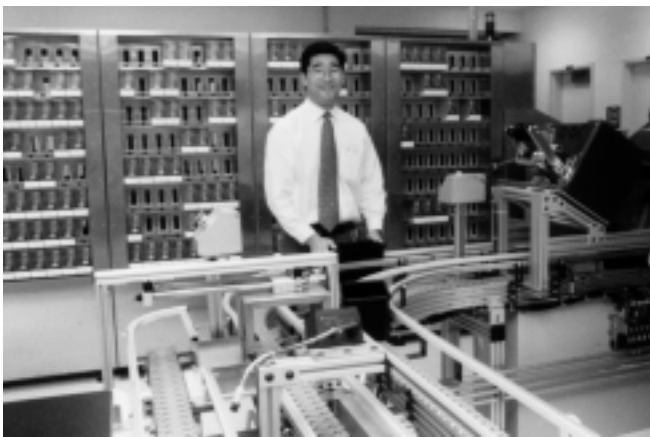
Diana is married to Jose Michel, coordinator for distance education for the California Community Colleges, Chancellor's Office, and is the mother of three daughters.

Arrowhead Regional Medical Center

A technologically advanced facility prepared for "the next big one"!



The half-shell curved design of the patient tower at ARMC is buttressed by its "X-Supports," which allow the tower to flex from side to side in the event of an earthquake.



An ARMC hospital employee operates their automated prescription system.

Welcome to the hospital of the future! With the March opening of the Arrowhead Regional Medical Center (ARMC) in Colton, local residents and hospital officials are praising the technological features of this 373-bed facility. The facility features unique earthquake-safe construction, state of the art equipment, digital filmless radiology systems and an electronic medical records system.

The project was prompted by legislation (SB 1953, Chapter 740, Statutes of 1994) requiring that California Acute Care hospital buildings meet new earthquake standards. The new hospital has a number of unique features to help it withstand seismic forces. For instance, instead of resting on a foundation, the hospital rests atop 400 base isolators, huge steel and rubber spheres that are intended to cushion the structure from the force of a quake, and 200 viscous dampening devices. Seismic portals, consisting of hexagon-shaped material used in airplane wings, also join the hospital complex's three buildings. These portals slide on Teflon-coated rails so the buildings can move with the force of a quake and maintain passage between the structures.

The facility features a complete hospital with six medical/surgical units, maternal and child health nursing units, five intensive care units including a neonatal intensive care unit, and a diagnostic and treatment center. An automated prescription system is also a welcomed addition to the new facility – it has the ability to fill as many as 250 prescriptions per hour. The medical center also offers a new, expanded behavioral health facility as well as more than 65 outpatient specialty care centers featuring pediatrics, internal medicine, ophthalmology, orthopedics and more. Congratulations to Arrowhead Regional Medical Center on their new facility!!!

OSHPD Y2K Update

OSHPD is prepared for Year 2000 challenges

"OSHPD has undergone an independent assessment and review by a private consulting firm to assure that its systems have been fully tested and are Y2K ready."

The Office of Statewide Health Planning and Development recognizes that the Year 2000 problem is one that may affect ongoing operations. In an effort to address this issue, the OSHPD has implemented an aggressive program to remedy and/or upgrade its current mission-critical systems that support internal operations and those that interact with external entities to assure operation before, at, and after the change from 1999 to 2000.

Like all California State agencies, OSHPD has undergone an independent assessment and review by a private consulting firm to assure that its systems have been fully tested and are Y2K ready. OSHPD has also implemented a continuing program of review and testing up to, during, and after the date change to ensure that its systems will continue to operate as required.

OSHPD has paid particular attention to the many health care information systems it uses to collect, edit, and publish financial, utilization and patient care data for use by a wide spectrum of data users – from government agencies to the health care industry and the public. We are confident that all data for reporting periods beginning on or after January 1, 2000, that are processed by and published from these systems, will be Y2K compliant. Any previously published data products for reporting periods beginning prior to January 1, 2000, will remain as is, and will contain 2-digit year dates.

OSHPD also recognizes that there are questions regarding the impact of embedded chip failures in equipment purchased and used by the State. As a purchaser of such equipment from a variety of sources, the State has implemented a comprehensive plan to obtain assurances from its suppliers that their equipment will be Y2K compliant.

While we have taken great care to identify and remedy potential Y2K computer failures and inaccuracies, it is possible that there may be unanticipated errors. Should you suspect any failures or inaccuracies in OSHPD health care information systems or data products, please contact OSHPD's Healthcare Information Resource Center immediately at (916) 322-2814.

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The State of California is committed to minimize the impact of the Y2K problem. For more information regarding the Y2K effort being undertaken by the State of California, we invite you to visit the Department of Information Technology website at www.doit.ca.gov. For more information specific to OSHPD, please contact Diana Cassady, our Y2K Project Manager, at (916) 324-0589 or dcassady@oshpd.cahwnet.gov.

Are Hospitals Ready for Emergencies? CHA plans September 16 statewide Y2K disaster exercise

The California Healthcare Association and their Regional Associations are working with governmental entities to conduct a special statewide disaster exercise in California. It is scheduled for September 16. The purpose of the exercise is to allow acute care inpatient facilities to assess their contingency plans for Y2K and general emergency preparedness, and will enable all involved to jointly evaluate emergency communication linkages. Local and regional agencies also will be asked to participate.

For more information, contact Roger Richter, CHA,
916-552-7570 or rrichter@calhealth.org

California Hospital Outcomes Project

How do California's hospitals perform in treating Pneumonia?

Each year, approximately 4 million adults in the United States are diagnosed with pneumonia, leading to more than 600,000 hospitalizations at a cost of near \$4 billion. California has its fair share of cases, reporting that over 75,000 pneumonia-stricken adults were hospitalized in 1996. Six percent of these patients died in the hospital. With these numbers in mind, the OSHPD has commissioned a study to look at the mortality rates among pneumonia patients who are admitted to California's hospitals.

The California Hospital Outcomes Project is an important responsibility of OSHPD's Health Policy and Planning Division. In 1991, the Legislature mandated that OSHPD use its Patient Discharge Dataset to report annually on the quality of care in California hospitals (Chapter 1073, Statutes of 1991). The Outcomes Project develops public reports comparing all California hospitals on the outcomes of their care for selected conditions.

The primary goal of the California Hospital Outcomes Project is to improve the quality of hospital care available to all California citizens. Its reports provide hospitals with systematic information about their performance and encourage them to examine their processes of care to improve quality. The reports also provide insurers, employers, and consumers with information that is helpful in making choices of health care providers.

The California Hospital Outcomes Project reports contain risk-adjusted outcome rates for each hospital on selected conditions and procedures. Conditions and procedures are selected based on criteria set forth in the legislation – primarily the cost to treat the condition, its frequency, the appropriateness of using the Patient Discharge Dataset to measure risk-adjusted outcomes for the condition, and the likelihood that care influences outcomes. The project's Technical Advisory Committee provides advice on the selection of conditions and procedures to study. Prior studies of the Outcomes Project have focused on outcomes of heart attack care, mortality after hip fracture, and maternal outcomes following delivery.

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In the fall of 1998, community-acquired pneumonia was selected for study because of its importance, frequency and cost of treatment. Pneumonia is the sixth leading cause of death nationally and the primary cause of death from infectious diseases.

OSHPD has contracted with the University of California at San Francisco to help in conducting the Pneumonia Outcomes Study. It will look at risk adjusted mortality rates (within 30 days of hospital admission) among pneumonia patients admitted to California hospitals. A risk-adjustment model will be developed, using OSHPD's Patient Discharge Dataset, to take into account differences in the severity of illness of patients treated at different hospitals. A combination of clinical expertise and statistical tests will be used to identify the risk factors to be used in the adjustment process.

The Pneumonia Outcomes Study will also include analyses to validate the approaches used in developing the risk-adjusted mortality rates. This validation study involves reviewing a sample of patient medical records from representative hospitals. The study examines the accuracy of the discharge data and also determines whether the models would change significantly if detailed clinical data not included in the discharge abstract (such as laboratory results or physiological measures) were considered. The validation analysis also examines the relationship between what the hospital does to treat the patient (process of care) and patient outcomes.

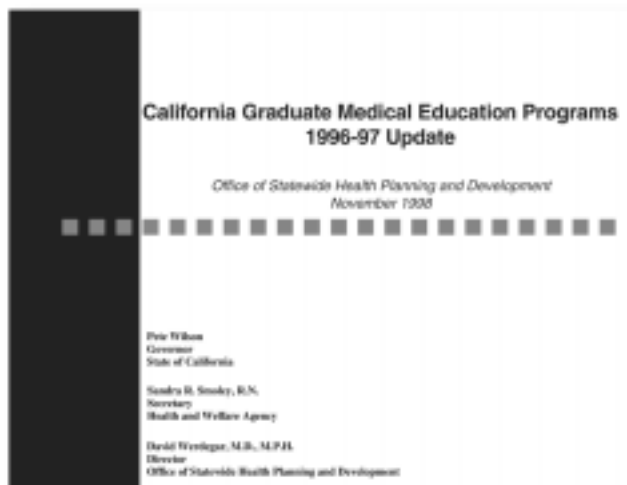
The risk-adjustment model and results from the validation analyses are expected to be published in the spring of 2000. The model will then be applied to the most current OSHPD Patient Discharge Dataset to produce a public report on risk-adjusted mortality for pneumonia in all California hospitals.

For more information about this study, please contact Mary MacDonald, Project Manager, Health Policy and Planning Division at (916) 322-9137 or through email at mmacдона@oshpd.cahwnet.gov.

"The primary goal of the California Hospital Outcomes Project is to improve the quality of hospital care available to all California citizens."

California Graduate Medical Education Program

A look at California's future physician workforce



Since the publication of the last “Monitor,” the Office of Statewide Health Planning and Development released a report describing the state of medical residency programs throughout California during the 1996-97 academic year. This report, entitled “California Graduate Medical Education Programs, 1996-97 Update,” was researched and written with an eye toward California’s future physician workforce, and to aid in developing state health workforce strategies.

“Graduate medical education” (GME) begins after graduation from medical school and encompasses residency and fellowship training. It is essential to examine this phase of medical training as it has the most immediate and direct influence on the composition of the physician workforce. It is this period of training that determines the doctors future career, as a primary care physician or as a specialist.

The first survey of California’s GME was published by OSHPD in 1996. The 1996-97 update is the second report. A new report, covering the academic years of 1997-98 and 1998-99, will be released next year.

All graduate medical education programs within the state (637) were surveyed, with close to 90 percent responding that they were based at or affiliated with one of the state’s nine medical schools. Six of these medical schools are public (the University of California’s five schools plus Charles Drew) and three are private (Loma Linda, Stanford, and the University of Southern California). At the time of the survey, the GME programs associated with the public medical schools were responsible for 54 percent of residency and fellowship training.

Of particular note at this time are several bills currently under discussion by the California Legislature addressing the ongoing need for primary care physicians (in this case defined as family practitioners, general internists, general pediatricians and obstetrician/gynecologists). This “Update” reported that 44 percent of trainees in the 1996-97 academic year were in primary care, and 56 percent were in specialty training. It points out, however, that this figure is deceiving as many internists and some

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OSHPD's Rural Health Development Grants

The first of its kind for capital improvements

Congratulations to recipients of the State's Rural Health Development Grants! The first of its kind to allow for capital improvements, approved projects included Y2K compliance, construction/remodeling, computer equipment and patient care equipment. In all, 178 eligible applications were received, with 60 projects funded for a total of \$2,773,783. The list of awardees is as follows:

<i>Awardee</i>	<i>Amount</i>	<i>Awardee</i>	<i>Amount</i>
Butte Cnty. Public Health	\$50,000	Cnty. of Modoc	\$50,000
Copperopolis Medical Cntr.	\$49,106	Modoc Medical Cntr.	\$50,000
Colusa Community Hospital	\$47,300	Mammoth Hospital	\$50,000
Del Norte Cnty. Mental Health	\$50,000	Mono Cnty. Public Health	\$28,900
EDCA Lifeskills	\$44,499	Mono Cnty. Mental Health	\$50,000
El Dorado Cnty. Public Health	\$50,000	Community Medical Cntrs.	\$22,150
Coalinga Regional Medical Cntr.	\$48,700	Emergency Services Foundation	\$50,000
Firebaugh Community Health Cntr.	\$49,829	Karuk Tribe of California	\$35,760
Sierra Kings District Hospital	\$47,090	Mobile Medical Office	\$50,000
Valley Health Team	\$49,978	Nevada Cnty. Public Health	\$50,000
Glenn Medical Cntr.	\$40,062	Sierra Family Health Services	\$15,800
Adult Day Health Cntr.	\$50,000	Eastern Plumas Healthcare District	\$46,911
North Coast Emergency Medical	\$50,000	Greenville Rancheria Tribal Health	\$50,000
Redwoods Rural Health Cntr.	\$50,000	San Geronio Memorial Hospital	\$40,500
United Indian Health Services	\$37,467	Panorama Ranch	\$44,383
Clinicas de Salud del Pueblo	\$49,878	Camp Mountain Health Cntr.	\$50,000
Imperial Cnty. Mental Health	\$50,000	Fallbrook Community Clinic	\$50,000
Kern Cnty. Public Health	\$44,060	North Cnty. Health Services	\$50,000
Sage Community Health Cntrs.	\$49,600	Los Robles Community Medical Cntr.	\$50,000
Visiting Nurse Assn. Foundation	\$39,875	Hill Cnty. Community Clinic	\$47,300
Lassen Community Hospital	\$50,000	Mayers Memorial Hospital	\$50,000
Avalon Municipal Hospital & Clinic	\$50,000	Adult Day Healthcare	\$50,000
Madera Cnty. Public Health	\$29,161	Siskiyou Family Healthcare	\$50,000
Point Reyes Medical Clinic	\$43,980	Siskiyou Home Health Services	\$34,974
John C. Fremont Healthcare	\$44,000	Southern Trinity Health Services	\$50,000
Consolidated Tribal Health Project	\$50,000	Lindsay District Hospital	\$50,000
Mendocino Coast Hospital	\$50,000	Kings View-Tuolumne Cnty.	
Dos Palos Memorial Hospital	\$50,000	Mental Health	\$49,286
Golden Valley Health Cntrs.	\$50,000	CommuniCare Health Cntrs.	\$49,734
Livingston Community Health Serv.	\$46,500	Yolo Adult Day Health Cntr.	\$47,000
Canby Family Practice Clinic	\$50,000	Total Awards	\$2,773,783

Nurse Practitioner and Physician Assistant Training Grants

Manpower Policy Commission decisions on nurse practitioners and physician assistant programs

At a recent meeting of the California Health Manpower Policy Commission, grant awards for the 1999/00 fiscal year were made in support of the physician assistant (PA) and family nurse practitioner (FNP) programs. The awards help support the efforts of these training programs to increase the supply and improve the geographic distribution of primary care providers in the State.

Any questions relating to the grant awards or the physician assistant and family nurse practitioner programs may be directed to Susan Brazil, Primary Care Resources and Community Development division, at 916-654-2091.

Nurse Practitioner & Physician Assistant Training Grant Awards

<i>School</i>	<i>Program Type</i>	<i>Base Funding</i>	<i>PA Expansion</i>	<i>FNP Expansion</i>	<i>Special Projects</i>	<i>Total</i>
UC San Diego	FNP			\$37,293		\$37,293
Stanford University	PA	\$142,080	\$103,447		\$60,624	\$306,151
Western University	PA	\$12,600				\$12,600
UCLA School of Nursing	FNP			\$202,000		\$202,000
University of Southern CA	PA	\$97,280	\$62,611			\$159,891
UC Irvine	FNP	\$54,194				\$54,194
CSU Long Beach	FNP			\$50,739	\$40,668	\$91,407
Azusa Pacific University	FNP			\$59,860	\$29,458	\$89,318
UCSF School of Nursing	FNP	\$45,010		\$144,638		\$189,648
UC Davis	PA	\$153,385	\$105,181		\$78,052	\$336,618
Charles R. Drew Univ.	PA	\$84,826	\$56,725			\$141,551
Totals		\$589,375	\$327,964	\$494,530	\$208,802	\$1,620,671

OSHPD Health Data Services Program Products

A listing of the services and products we offer

OSHPD, through our Healthcare Information Division, maintains several health facility data programs related to hospitals, long-term care facilities, licensed clinics, home health agencies and hospices. The resulting data and information products are distributed by the Division's Healthcare Information Resource Center (HIRC). The Center also distributes products produced by other divisions within OSHPD and other departments within the Health and Human Services Agency. For more information on our products or services, check out our website at www.oshpd.ca.gov. Or, contact HIRC at (916) 322-2814 or e-mail: hirc@oshpd.cahwnet.gov.

Products and Publications

Patient Discharge Data

Two versions available: Version A includes a patient record linkage number which makes it possible to link hospitalizations for the same patient over time and among different hospitals - useful for medical research; Version B does not have the patient linkage number but includes a 5-digit zip code – useful for patient origin/market share analyses. For each patient, both versions include demographic data, diagnoses, procedures, E-codes, disposition and length of stay, as well as hospital ID number, admit source, and charges. Each version is available in two sizes: 4 secondary diagnoses with 4 other procedures or 24 secondary diagnoses with 24 other procedures. Data are available beginning in the year 1983. Available on CD, tape, or cartridge.

Utilization by Diagnosis Related Group (DRG)

This product summarizes discharges, charges, and length of stay by Diagnosis Related Group (DRG), by payer, and by patient age category, from 1994 through 1997. It can be used to compare hospital charges and length of stay by DRG. Available on CD.

Top 25 DRGs for 1997

This product, consisting of three downloadable Internet files, lists the top 25 DRGs by discharge, payer, average length of stay, and total charges for 1997, and compares the rankings with 1995 and 1996.

California Hospital Outcomes Project: Report on Heart Attack

Based on the patient discharge data set and using sophisticated risk-adjustment techniques, this report identifies hospitals whose outcomes for treating patients with acute myocardial infarction are better than expected, as expected, or worse than expected. Reports have been published in 1993, 1996, 1997. The first volume of the two-volume set presents results, while the second volume describes the research methodology. This report is available in print only.

California Hospital Outcomes Project: Maternal Outcomes Following Delivery, 1996

Based on the patient discharge data set, this publication presents statewide results of a two-year study of maternal outcomes following delivery. Research methodology is also included. Available in print only.

Individual Hospital Financial Data for California

This publication is based on the Annual Hospital Financial Reports and presents a profile of each individual non-federal hospital licensed in the State, including detailed financial data and utilization statistics. It is available in print, or as an electronic database on CD-ROM or magnetic tape. Financial data from previous years are also available, beginning with 1976.

Aggregate Hospital Financial Data for California

This publication complements the Individual Hospital Data, providing summaries by county, type of control (for-profit, non-profit, church, government), bed size, and statewide. Available in print or electronic media, since 1976.

Selected Annual Financial Data for Hospitals

This product presents key hospital descriptors, assets, liabilities, revenue, expense, utilization and labor information. It is available on diskette or via the Internet.

Quarterly Individual Hospital Financial and Utilization Data

Produced quarterly, this publication presents data for individual hospitals, as reported through Hospital Quarterly Financial and Utilization Reports. The publication also presents calculated rates of change in key performance indicators (such as net income and occupancy) in the current quarter as compared to the same quarter a year earlier and for the past 12 months as compared to the prior year. It is available in print, or as an electronic database on CD-ROM or magnetic tape, beginning with the first quarter of 1981.

Quarterly Aggregate Hospital and Utilization Data

This publication complements the Individual Quarterly data, providing summaries by county, type of control, bed size, and statewide. Available in print or electronic media since 1981.

Annual Utilization Report of Hospitals

This product presents data from the Hospital Utilization Data Program and consists of health facility descriptors, bed utilization by licensed category, and distinct part long-term care services. Available on diskette or via the Internet.

Annual Utilization Report of Hospitals – Statewide Summary Trend Data, 1988-1997

This product presents ten years of selected, aggregated data from the Hospital Utilization Data Program, and consists of general facility information, patient census information, type of care and utilization data. This data file is available on the Internet.

Individual Long-term Care Facility Financial Data for California

This publication presents profiles of individual long term care facilities, including financial data, utilization statistics, and other facility information. It is available in print, or as an electronic database on CD-ROM or magnetic tape. Data are available since 1977.

Aggregate Long-term Care Facility Data for California

This publication complements the individual facility report, providing summaries of data by county, bed size and type of control. Available in print or on magnetic media, since 1977.

Long-term Care Facility Selected Data

This product presents data selected from the Long-term Care Facility Financial Data Program, and consists of facility descriptors, assets, liability, revenue and expense, utilization and labor information. Available on diskette or via the Internet.

Annual Utilization Report of Long-term Care Facilities

This product presents data from the Long-term Care Utilization Data Program, and consists of general facility information, patient census information, type of care and utilization data. Available on diskette or via the Internet.

Annual Utilization Report of Long-term Care Facilities – Statewide Summary Trend Data, 1988-1997

This product presents ten years of selected, aggregated data from the Long-term Care Utilization Data Program, and consists of general facility information, patient census information, type of care and utilization data. Available on diskette or via the Internet.

Annual Utilization Report of Primary Care Clinics

This product presents data from the Primary Care Clinic Utilization program and consists of individual facility information such as number of patients and encounters; patients by age, gender, race and ethnicity; charges and revenue by payer source. This data file is available on diskette or via the Internet.

Annual Utilization Report of Primary Care Clinics – Statewide Summary Trend Data, 1991-1997

This product presents seven years of data from the Primary Care Clinic Utilization program and consists of selected data elements, including encounters by type of service, revenue collected by source, and unduplicated number of patients. This data file is available via the Internet.

Annual Utilization Report of Specialty Care Clinics

This product consists of individual facility information on alternative birth centers, and psychology, surgical, chronic dialysis and rehabilitation clinics. The information includes number of patients and encounters, number of operating rooms (of surgical clinics), and major capital expenditures. This data file is available on diskette or via the Internet.

Annual Utilization Report of Home Health Agencies & Hospices

This product presents data from the Home Health and Hospice Utilization Data Program. This data file contains individual facility information, which includes home health agencies and hospices by ownership type, number of visits by principal diagnosis, and number of visits by reimbursement source. This data file is available on diskette or via the Internet.

Annual Utilization Report of Home Health Agencies – Statewide Summary Trend Data, 1994-1997

This product presents four years of data from the Home Health Utilization Data Program. It is available for download from the Office's Internet site. Included are selected data elements such as number of agencies reporting by ownership type, unduplicated number of patients, visits by principal diagnosis and number of visits by reimbursement source.

Not-for-Profit Community Benefit Legislation: SB 697 Report to the Legislature, January 1998

This publication presents an overview of the first cycle of the community health needs assessment and benefit planning processes which nonprofit hospitals are required to undertake as a result of SB 697. This publication will be updated bi-annually. It is available in print only. Copies of the individual hospital plans submitted to OSHPD are also available to the public.

California Health Care Fact Book

This publication, currently in its second edition, presents a variety of data concerning the health status and health care of Californians. In researching this publication, information was gathered from several state agencies and the federal government. The 2nd edition is available in print or from the Internet.

California Graduate Medical Education Programs, 1996-97 Update

This publication presents the results of a survey of all graduate medical education (GME) programs operating in California during the 1996-97 academic year. The purpose was to obtain a comprehensive view of this phase in the career development of physicians in the State, since it has the most immediate and direct influence on the composition of the physician workforce. The publication gives a glimpse of tomorrow's physician workforce, and offers provides information that can help guide strategies for needed change.

The Northridge Earthquake, A Report on the Performance of Hospitals

This report provides a synopsis of damage sustained at hospital and skilled nursing facilities in the Los Angeles area as a result of the Northridge earthquake. The report includes information on the performance of primary structures and nonstructural elements, including architectural, mechanical and electrical systems and components. Information on U.S. Government health care facilities, which are outside OSHPD's jurisdiction, are not included in this report.

Services

Custom Reports

By special request, analysts within the Healthcare Information Resource Center are available to prepare custom data reports. Data are used for marketing research, medical research and other statistical treatments. Prices are quoted by product.

Confidential Data Requests

Requests for confidential data are subject to regulation and procedures to protect patient privacy. The Office works extensively with medical researchers and other requestors to refine the specific data needs, to enable high quality research while protecting the confidentiality of patient level information.

Appointments

OSHPD Staff, Board, and Commissions

OSHPD Staff

On July 1, **Roxanne Andrews** was appointed as Deputy Director for the Health Policy and Planning Division (HPP). Roxanne has been with the Division since 1997, directing OSHPD's studies of risk-adjusted hospital care outcomes. Prior to her work at OSHPD, Roxanne worked with the federal Agency for Health Care Policy and Research where she served as an expert in the Center for Delivery Systems Research. She earned her Ph.D. in Social Psychology from the University of California at Santa Cruz, has held various positions in health services research with several public agencies and private firms, and has an impressive list of publications to her credit.



ROXANNE ANDREWS

California Health Policy and Data Advisory Commission (CHPDAC)

The single State advisory body for health facilities data functions, CHPDAC advises the Office on health policy and health information issues.

M. Bishop Bastien is the director of Governmental Affairs, Western Region, for Aetna U.S. Healthcare. Mr. Bastien is responsible for the direction of legislative-related activities within nine western States. Prior to his work at Aetna, he worked as a Legislative Advocate for Richard Robinson & Associates, Chief of Staff for the Assembly Republican Leader's Office, Policy Consultant for the Assembly Republican Caucus and Legislative Assistant for State Senator John Doolittle. Mr. Bastien received his B.A. in Government from the California State University, Sacramento.



M. BISHOP BASTIEN

Janet Greenfield comes to CHPDAC with 25 years of experience in the health care industry. Since 1995, she has been Assistant Vice President of Operations for the Surgery Division of Health South and is responsible for overseeing the operations of up to eight surgery centers. Her prior experience includes serving as an Administrator and Manager of Medical Services for the Inland Surgery Center and Directing Nurse of the Operating Room at the Redlands Community Hospital in Redlands, California. Ms. Greenfield graduated from the Nebraska Methodist Hospital School of Nursing and later received her Bachelor of Science degree in Health Care from the University of Redlands.



JANET GREENFIELD

A. Peter Kezirian, Jr. is with the Cooperative of American Physicians/Mutual Protection Trust. As its Vice President for Strategic Business Development, he is responsible for helping to identify solutions to the medical risks inherent in the practice of medicine and aid in CAP-MPT's formulation of new business approaches to protect CAP members and provide additional professional opportunities to these physicians. Before joining the CAP-MPT, Mr. Kezirian served as Governor Pete Wilson's Legal Counsel during his presidential campaign and was later appointed as General Counsel for the California Department of Corporations. Prior to his public service work, Mr. Kezirian was an associate with the New York law firm of Debevoise & Plimpton in their Los Angeles Office.



A. PETER KEZIRIAN, JR.

Thomas P. McCaffery is Director of Government Affairs and Advocacy for the Alliance of Catholic Health Care Systems, a joint public policy and advocacy consortium of three California Catholic health systems —Catholic Healthcare West, St. Josephs Health System, and St. Agnes Medical Center in Fresno, an affiliate of the National Holy Cross Health System. Mr. McCaffery helps to formulate the three system's policy agenda and develop and coordinate their grassroots advocacy efforts. His past experience includes nearly eight years serving in the Pete Wilson Administration. As Assistant Secretary, Deputy Secretary and later Undersecretary for the California Health and Welfare Agency, Mr. McCaffery was responsible for formulating, analyzing, and evaluating the program and fiscal impact of major policies of the Administration in the areas of health services, welfare and employment. He also worked in the Washington Office of Governor Wilson as a Washington Representative and Legislative Assistant. Mr. McCaffrey received his B.A. in Government and International Relations from the University of Notre Dame and his Masters in Public Policy from the University of California, Berkeley.



THOMAS P. McCAFFREY

Hugo Morris has been on the CHPDAC Board for 18 years. He serves as a consultant to the Public Affairs Office for the Teamsters Joint Council 42, where he coordinated the political screening committee and Teamster support for candidates and negotiated collective bargaining agreements. Mr. Morris serves as a member of the Industrial Relations Research Association, Fair Housing Council of the San Fernando Valley, CORO Foundation Association, Western Pension Conference and Southern California Association of Benefit Plan Administrators.



HUGO MORRIS

Adrian E. Ortega, M.D. is a physician and Assistant Professor of Surgery with the University of Southern California, Department of Surgery. His past experience includes serving as a Clinical Instructor in Surgery at USC and as Supervisor of Residents at the Los Angeles County and USC Medical Center. Dr. Ortega received his B.A. in Human Biology from Stanford University and his MD from Harvard Medical School.



ADRIAN E. ORTEGA, MD

Jerry Royer, M.D. is a physician executive with over 25 years' experience in health care management – developing integrated regional delivery systems, formulating and implementing physician strategies, and designing and instituting quality initiatives. In addition to providing his management expertise through consulting services, Dr. Royer served as the Vice President and Medical Director for Catholic Healthcare West, Senior Vice President of Medical Affairs and Quality Assurance at St. Joseph's Health Network in Mt. Clemens, MI, and Associate Hospital Director for the University of Missouri, Columbia Health Sciences Center. Dr. Royer received a B.A. in Sociology from Manchester College, a M.D. from Indiana University School of Medicine and his M.B.A. from Northwestern University.



JERRY ROYER, MD

Hospital Building Safety Board (HBSB)

Advises the Director of OSHPD on the administration of the Hospital Facilities Seismic Safety Act and acts as a board of appeals with regard to seismic safety and fire/life safety issues relating to hospital facilities.

Marshall Lew, Ph.D. is currently Director of Engineering for Law/Crandall. He is responsible for the engineering and environmental technical services and is on the management team of the corporation. He has worked extensively with commercial, industrial, and government clients on a wide variety of geotechnical assignments. Dr. Lew is also a lecturer for the Continuing Engineering Education Department of California State University, Long Beach, where he teaches the fundamentals of geotechnical engineering for civil and structural engineers. Dr. Lew received his Ph.D. in engineering from the University of California, Los Angeles.



MARSHALL LEW, PHD

John A. "Trailer" Martin is Chair of the Hospital Building Safety Board. He serves as president of John A. Martin & Associates, Inc., a structural engineering firm. He has expertise in both structural design and plan review services, with a specialization in computerized seismic design and analysis. He has taught graduate design courses in earthquake engineering, structural steel design, and reinforced concrete design at several universities throughout the state. Mr. Martin received his Master of Science degree in Civil Engineering from California State University, Long Beach.



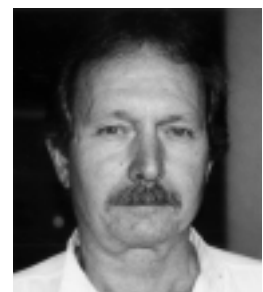
TRAILER MARTIN

John E. Millsap, AIA, is the Facilities Development Director for Sutter Health, an integrated health care system that includes 26 hospitals, 5,000 physicians and 35,000 employees in Northern California. His division serves as the in-house project management company providing master planning, programming, and business plan support. He is responsible for managing design and construction projects through the system. Prior to Sutter Health, Mr. Millsap was Director of Healthcare Design and Construction for the University of California, San Diego, and in private practice as an architect. Mr. Millsap holds a Bachelor of Architecture degree from the University of California, Berkeley, and an NCARB Certificate and License in California and Wisconsin.



JOHN E. MILLSAP, AIA

Bruce Schell, a Consulting Geologist, conducts engineering geological investigations for government agencies, other geotechnical firms, land developers, insurance companies, law firms and property owners. He is also active in geological and seismological research and has published numerous scientific papers on both research and project-related work. Mr. Schell's current research interests include the relationship between earthquake faults and seismically induced ground failures (surface rupture, liquefaction and landslides), fault rupture, and earthquake frequency in the western U.S. and subduction-zone seismicity and tectonics. Mr. Schell received his graduate degree in geology from the California State University, Los Angeles.



BRUCE SCHELL

Health Professions Education Foundation (HPEF)

A nonprofit, public benefit corporation established for the purpose of soliciting funds from the private sector and providing financial aid to economically disadvantaged students. The Foundation oversees the administration of two funds established by State legislation: the Health Professions Education Fund and the Registered Nurse Education Fund.

Mary M. Canobbio, RN, MN, FAAN has been in the UCLA School of Nursing for the past 15 years. Currently she is a faculty lecturer in the Acute Care Nurse Practitioner Program. Her area of clinical expertise is in cardiovascular diseases. Ms. Canobbio is a clinical researcher in the area of adult congenital heart disease. She is currently looking at reproductive and gynecologic outcomes in women with congenital heart disease and after heart transplantation. She received her BSN from CAL State University, LA and her Masters in Nursing and in Public Health at UCLA.



MARY M. CANOBBIO,
RN, MN, FAAN

Jeanette Grattan Parker is Co-Founder/Owner and Member of the Board of Directors of Golden Day Schools, Inc. and University Alternative Schools, and has served as Executive Director for the last 16 years. The schools serve over 700 children daily and offer Pre-School, Kindergarten, grades 1-12, private grade school and special education programs. Also offered are latchkey programs. Ms. Parker is also the Founder and current President of Today's Fresh Start, Inc., a nonprofit tutoring program for children who are failing in math and reading. Her prior experience includes private ownership of a fashion design company that manufactured, designed and distributed a line of women's clothing and an import/export company with business in Mainland China and the Far East. Ms. Parker received her B.S. in Early Childhood Education and Development from the University of Minnesota, her M.A. in Management from the University of Redlands, and her Doctorate Degree in Philosophy from the California Pacific School of Theology.



JEANETTE GRATTAN
PARKER

Scott C. Syphax is Associate Director of Government Relations for the California Medical Association. Before his tenure with CMA, Mr. Syphax was Executive Officer of the California State Board of Behavioral Science Examiners and former Senior Consultant to Senator Robert Presley. Prior to government service, Mr. Syphax was Managing Partner of Prism Strategic Management, a consulting firm specializing in corporate restructuring. Mr. Syphax received his B.S. in Business Administration from California State University, Sacramento, and was a graduate of the Sacramento Entrepreneurship Academy.



SCOTT C. SYPHAX

California Graduate

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pediatricians go on for further sub-specialty training (i.e. cardiology, rheumatology, nephrology, etc.).

This report reviewed the role of the State's University system in preparing a physician workforce to meet the needs of the California residents. The University began increasing the number of generalists and decreasing the number of specialists in 1992 and set a goal of 50/50 primary care to specialty care by 1997-98, and 20 percent in family practice by 2001-2002. The progress the University has made is reported annually in its "Changing Directions in Graduate Medical Education," which OSHPD is required to review as part of the Memorandum of Understanding undertaken by the University in 1994. The last report available was released by the University for the 1996-97 academic year and is reviewed in the OSHPD "Update." A new report was just released by the University in July and will be reviewed in the next "Update".

For more information or to receive a copy of this report, please contact Laurie MacIntosh at (916) 654 - 1490.

What's New in Hospital Construction?

A listing of Facilities Development Division's larger construction/remodel projects as of June 7, 1999

Facility	Cost
Los Angeles County USC Medical Center	\$750,000,000
UCLA/Santa Monica Hospital Medical Center	\$500,000,000
UCLA Medical Center	\$260,000,000
San Bernardino County Medical Center	\$256,236,922
St. John's Hospital and Health Center	\$128,073,532
Valley Children's Hospital-Madera	\$ 95,808,100
Riverside County Regional Medical Center	\$ 92,499,300
City of Hope National Medical Center	\$ 88,000,000
Kaiser Hospital Santa Clara Replacement Project	\$ 64,519,000
Huntington Memorial Hospital	\$ 55,000,000
Contra Costa Regional Medical Center	\$ 51,308,728
Los Angeles County Rancho Los Amigos Medical Center	\$ 50,000,000
Alameda County Medical Center	\$ 48,470,000
St. Francis Medical Center	\$ 45,000,000
Los Angeles County Harbor/UCLA Medical Center	\$ 44,227,000

Health Careers

continued from page 5

The HCTP is uniquely experienced and equipped to help health care providers meet their needs for entry- and mid-level health care workers. HCTP is part of OSHPD's strategic plan to work in partnership with the public, the health care industry, educational institutions, and government agencies in developing training programs that will help meet health care needs of California.

For more information about this program, please contact Gene Pittell at 916-654-2887.

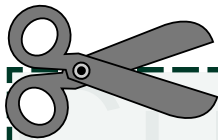
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